

2700 INTERNAL TRANSFER REQUEST FOR S.N.

09/758,911

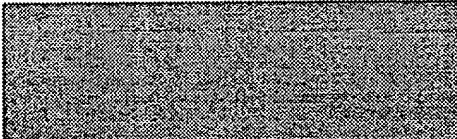
| | |
|--------------------------|--|
| DATE: <u>5-17-01</u> | FROM: <u>BENNY Q. TIEU</u> (print name) |
| REASON(S): | |
| FORWARD TO: | <input type="checkbox"/> (check box) <input checked="" type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input checked="" type="checkbox"/> (check box) |
| A. Art Unit: <u>2661</u> | A. You had Parent |
| B. Class: <u>370</u> | B. See Title |
| C Subclass: | C. See Abstract |
| | D. See Claim(s): <u>✓</u> |

FURTHER EXPLANATION IF NEEDED:

VOIP calls

| | |
|--------------------|--|
| DATE: _____ | FROM: _____ (print name) |
| REASON(S): | |
| FORWARD TO: | <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |
| A. Art Unit: _____ | A. You had Parent |
| B. Class: _____ | B. See Title |
| C Subclass: _____ | C. See Abstract |
| | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

| | |
|--|--|
| DATE: _____ | FROM: _____ (print name) |
| REASON(S): | |
| FORWARD TO CLASSIFIER  | <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |
| A. You had Parent | |
| B. See Title | |
| C. See Abstract | |
| D. See Claim(s): _____ | |

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

| | |
|--------------------|--|
| DATE: _____ | CLASSIFIER: _____ |
| REASON(S): | |
| FORWARD TO: | <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |
| A. Art Unit: _____ | A. You had Parent |
| B. Class: _____ | B. See Title |
| C Subclass: _____ | C. See Abstract |
| | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED: